APPLICATION FOR SUBMISSION OF SUBDIVISION/LAND DEVELOPMENT PLANS

FINAL PLAN

To: Borough Planning Commission

Application is hereby made for review and approval of the Final Plan of a subdivision/land development hereinafter more particularly described and shown on the accompanying maps and documents.

1. Name of subdivision/land development__________________________________________________________

2. Location of subdivision/land development________________________________________________________
   __________________________
   Tax Map Number

3. Applicant’s Name ____________________________________________
   Address ____________________________________________________
   __________________________
   Phone __________________________

4. Name and address of present owner (if other than above)
   Name ______________________________________________________
   Address ____________________________________________________
   __________________________
   Phone __________________________

5. Date of tentative approval of Preliminary Plan by Planning Commission ______________

6. Does the Final Plan follow exactly the Preliminary Plan in regard to details and area covered? ____________ If not, indicate significant material changes________________________
   ______________________________________________________________________________________

7. Number of lots proposed for Final Approval ______________

8. List of maps and other material accompanying application and number of each.

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Signature of applicant ____________________________________________ Date____________
Date received _____________

Received by _____________________________

Action of Borough Planning Commission

Date ________________________  Approved __________________  Denied ____________

_____________________________________________

Chairman

Action of Borough Council

Date ________________________  Approved __________________  Denied ____________

_____________________________________________

President

_____________________________________________

Secretary